



PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) HRL033-B
In re Application of WU		
Application Number	09/655,466	Filed 09/05/2000
For Polar Tulane Liquid Crystals		
Group Art Unit	1756	Examiner Shean Chiu Wu

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- |  |           |
|--|-----------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))             | \$ _____  |
| <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$ 420.00 |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))          | \$ _____  |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))           | \$ _____  |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))           | \$ _____  |
- ☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ \_\_\_\_\_.
- ☐ A check in the amount of the fee is enclosed.
- ☒ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.
- ☐ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number \_\_\_\_\_.
- I have enclosed a duplicate copy of this sheet.
- I am the ☐ applicant/inventor
- ☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ attorney or agent of record.
- ☐ attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

07/09/2004

Date

00000124 09655466

420.00 DP

Signature

Cary Tope-McKay

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.